



HAZARDOUS WASTE MANIFEST

AR-05039

INSTRUCTIONS ON BACK

PLEASE TYPE OR FIRMLY PRINT IN ALL INFORMATION

GENERATOR/SHIPPER STATE I.D. # EPA I.D. # OPQ345898564

COMPANY XYZ COMPANY

ADDRESS 3001 NODDINGTIME AVE.

CITY SLEEPYVILLE STATE NOLAND ZIP 00099 PHONE 945/656-3211

DESCRIPTION OF WASTES

U.S. D.O.T. SHIPPING NAME	EPA H.W. Code #	Total Quantity By Weight or Volume	CONTAINERS		Hazardous Properties (1, 2, 3, 4, 5, 6)
			No.	Type	
WASTE SOLVENTS CONTAMINATED WITH PCB-S	PCB-S	55 gal	2	01	T
WASTE CAPACITORS (POLYCHLORINATED BIPHENYLS)	PCB-S	14000 #	8	01	T
TRANSFORMERS (POLYCHLORINATED BIPHENYLS)	PCB-S	8000 #	3	07	T

*(T) TOXIC, (C) CORROSIVE, (I) IGNITABLE, OR (R) REACTIVE

IMMEDIATE RESPONSE INFORMATION
GEORGE BLOW
PHONE 945/656-3211
NATIONAL RESPONSE CENTER 1-800-424-8802
Placards affixed/Provided
DRIVE SAFELY

SPECIAL HANDLING INSTRUCTIONS/GENERATOR/SHIPPER COMMENTS
DIKE AND CONTAIN IN CASE OF LEAKAGE OR SPILL.

GENERATOR'S/SHIPPER'S CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled; are in proper condition for transportation according to the applicable regulations of the Department of Transportation, the EPA, and the Arkansas Department of Pollution Control & Ecology, and have been consigned to the licensed hazardous waste transporter named herein on this date.

SIGNATURE PRINT NAME DATE

TRANSPORTER NO. 1 STATE I.D. # EPA I.D. # SSS000111222

COMPANY NODAWAY TRANSPORTERS

ADDRESS SLEEPYVILLE AVENUE

CITY DREAMTIME STATE NOLAND ZIP 000999 DATE 8/23/81 PERMIT NO. H11(PC734)

TRANSPORTER CERTIFICATION: This is to certify that the transporter named above received the waste material in the quantity described hereon on the date shown in proper condition for shipment from the Generator/Shipper for shipment to the destination shown.

SIGNATURE PRINT NAME DATE

TRANSPORTER NO. 2 STATE I.D. # EPA I.D. #

COMPANY

ADDRESS

CITY STATE ZIP DATE PERMIT NO.

TRANSPORTER CERTIFICATION: This is to certify that the transporter named above received the waste material in the quantity described hereon on the date shown in proper condition for shipment from the Generator/Shipper for shipment to the destination shown.

SIGNATURE PRINT NAME DATE

TREATMENT/STORAGE/DISPOSAL FACILITY STATE I.D. # EPA I.D. # ARD069748192

COMPANY ENSCO

ADDRESS AMERICAN OIL ROAD

CITY EL DORADO STATE ARKANSAS ZIP 71730 PHONE 501/863-7173

FACILITY CERTIFICATION: This is to certify that the waste material described below was delivered by the Transporter to this Facility on this date; that this Facility is permitted to accept the waste under the terms of its current permits, and is accepted (subject to the following discrepancies noted, if any).

SIGNATURE PRINT NAME JOE E. LYNCH DATE

ALTERNATE TREATMENT STORAGE DISPOSAL FACILITY STATE I.D. # EPA I.D. #

COMPANY

ADDRESS

CITY STATE ZIP PHONE

FACILITY CERTIFICATION: This is to certify that the waste material described below was delivered by the Transporter to this Facility on this date; that this Facility is permitted to accept the waste under the terms of its current permits, and is accepted (subject to the following discrepancies noted, if any).

SIGNATURE PRINT NAME DATE

NOTICE: THE ORIGINAL AND NOT LESS THAN TWO (2) COPIES MUST MOVE WITH THE HAZARDOUS WASTE SHIPMENT. ONCE DELIVERED, THE STORAGE/TREATMENT/DISPOSAL FACILITY MUST RETURN THIS ORIGINAL COPY TO THE GENERATOR.

ITEM BY ITEM INSTRUCTIONS

Generator / Shipper

1. Name, site address, phone number, and EPA I.D. No. are self-explanatory.
2. List the proper U.S. DOT shipping Name for each waste as identified in 49 CFR Part 171 through 177. When a waste is described by an n.o.s. description, the technical name(s) of the hazardous constituent(s) must be identified in addition to proper shipping name. Common or trade names are not acceptable.
3. For EPA HW Code # 's refer to 40 CFR Part 261, subparts C and D. Typical examples are: KO27, PO26, DO02. NOTE: If waste is not listed in 40 CFR Part 261 but meets the characteristics of EP Toxicity the waste code # will be DO00.
4. Total Quantity by Weight or Volume: total quantity for each waste listed.
5. Containers No. and Type. For type of container use the following codes: 01 = drums, 02 = tank, 03 = bulk, 04 = carton, 05 = bag, 06 = roll-off, and 07 = other.
6. Hazardous Properties are self explanatory.
7. Indicate special handling instructions and container exemptions for each waste as necessary.
8. List immediate response information (person to contact in case of emergency and their phone number).
9. List placards provided or affixed. (Example: Flammable).
10. Only a Generator's authorized representative can sign the manifest.
11. The Generator/Shipper must type or print firmly all information including the transporter's name, address, permit number (as issued by the ADPC & E) and EPA I.D. No; and the Treatment/Storage/Disposal Facility's name, address, and EPA I.D. No.
12. Transporter No. 1 must sign and indicate the date the shipment is received.
13. The Generator/Shipper is responsible for mailing copy # 6 of the manifest to the Department of Pollution Control and Ecology within 2 working days after the shipment is accepted by the transporter.

Transporter No. 1

1. Transporter No. 1 must sign to certify delivery, date of delivery.
2. Transporter No. 2 must sign to certify delivery, and date of delivery if applicable.

Treatment/Storage/Disposal Facility

1. The TSD Facility's authorized representative must indicate any discrepancies between the manifest and the shipment and reasons for rejection for all or part of the shipment.
2. The TSD Facility's authorized representative must sign and date the manifest certifying that shipment was received.
3. The TSD Facility is responsible for submitting copy # 2 of the manifest to the Department of Pollution Control and Ecology at the end of each calendar month.